

PARLIAMENTARIAN STATUS REPORT—106TH CONGRESS, 1ST SESSION, HOUSE ON-BUDGET SUPPORTING DETAIL FOR FISCAL YEAR 1999 AS OF CLOSE OF BUSINESS MARCH 17, 1999—Continued

[In millions of dollars]

	Budget au- thority	Outlays	Revenues
Total previously enacted	1,439,285	1,387,244	1,368,396
Entitlements and Mandatories: Budget resolution baseline estimates of appropriated entitlements and other mandatory programs not yet enacted	4,398	7,839
Totals:			
Total Current Level	1,443,533	1,393,074	1,368,396
Total Budget Resolution ¹	1,444,851	1,393,291	1,368,374
Amount remaining:			
Under Budget Resolution	1,298	217
Over Budget Resolution	22

¹ Includes \$1,030 million in budget authority and \$430 million in outlays for the funding of emergency requirements.

Source: Congressional Budget Office.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Mr. BROWN) is recognized for 5 minutes.

(Mr. BROWN of Ohio addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

EXCHANGE OF SPECIAL ORDER TIME

Mrs. CAPPS. Mr. Speaker, I ask unanimous consent to claim the special order time of the gentleman from Ohio (Mr. Brown).

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

PUTTING PATIENTS BEFORE PROFITS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mrs. CAPPS) is recognized for 5 minutes.

Mrs. CAPPS. Mr. Speaker, since arriving in Congress over a year ago, I have been fighting for a real Patients' Bill of Rights. I am an original cosponsor of this landmark legislation to rein in health maintenance organizations, the HMOs, and to return decision-making power to patients and their doctors. I am committed to seeing that Congress take decisive action and pass this bill now.

The only way to make comprehensive HMO reform a reality is to work together in a bipartisan way. That is why I was so disappointed last July when powerful special interests overpowered patients and blocked efforts to bring such a comprehensive HMO reform bill to the floor. Instead, they rammed through a Band-Aid that would have done nothing to actually protect patients. Our health care system needs serious medicine, not a political placebo.

The American people deserve better. As a nurse, I know firsthand the importance of health care that is accessible, of high quality, patient-centered health care. Basic patients' rights can often mean the difference between life and death.

As a Member of Congress, I was recently appointed to the House Committee on Commerce which oversees much of our Nation's health policy. If we are to accomplish anything in the field of health care, passing comprehensive managed care reform must be at the top of our agenda this session of Congress.

Medical decisions need to be made by patients and their doctors, and patients should have all of the information they need to make these critical decisions. These are the plain truths about health care.

Mr. Speaker, this historic measure will guarantee patients basic rights by allowing people to choose their own doctors, ending oppressive gag rules so patients have access to all critical treatment options and establishing health care quality and information standards which we can all follow. Most importantly, this bill will hold HMOs accountable by giving patients critical legal recourse when insurance companies deny necessary medical coverage. If patients can sue their doctors for poor care, they should be able to sue the big insurance bureaucrats who determine these cost-cutting decisions.

Mr. Speaker, last weekend I was privileged to join my colleagues on both sides of the aisle at the bipartisan retreat in Hershey, Pennsylvania. There people of many different philosophical political backgrounds talked about the need to restore civility to government and make our constituents proud. In the spirit of Hershey, I sincerely hope that all of our colleagues will work together to pass in this session a real Patients' Bill of Rights. By putting patients before profits, we can be a Congress that does something real and finally passes comprehensive managed care reform legislation now while we have the opportunity before it is too late.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. CALVERT) is recognized for 5 minutes.

(Mr. CALVERT addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Mr. FILNER) is recognized for 5 minutes.

(Mr. FILNER addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. SCARBOROUGH) is recognized for 5 minutes.

(Mr. SCARBOROUGH addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

PASS A PATIENTS' BILL OF RIGHTS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Mexico (Mr. UDALL) is recognized for 5 minutes.

Mr. UDALL of New Mexico. Mr. Speaker, I rise today to speak about reforming HMOs.

Last year I met a young mother in my hometown of Santa Fe. She was a single mother in her late twenties who was trying to raise a 7 year-old son while working full-time and attending school full-time as well. Now, as anyone will tell you, any young mother in this position would have her hands full. But what made this young woman unique was that her son had a serious medical condition that required access to very specific medical equipment and medication. She met with a family doctor who told them that her child could not lead a normal life without this very specific care. But when she went to her HMO to help pay for it, she received a letter saying her request had been denied. For months she tried to appeal, but it was to no avail. It was not until she threatened to wage a public relations campaign against the HMO and the local press that they reluctantly agreed to pay for the treatment. In the end it worked out for her and her young son, but for many, many more it does not.

Far too often, Mr. Speaker, we hear stories of patients who are left seriously ill or injured as a result of medical negligence by HMOs. These people find their lives in upheaval, not because of a medical mishap on an operating table, but rather because a profit-driven insurance company bureaucrat was more concerned with the bottom line than their well-being.

This must stop. We have got to put our partisan bickering aside and work towards a true bipartisan Patient Bill of Rights. The Patient Bill of Rights must allow doctors and patients to make the medical decisions. We must make sure that doctors and patients are once again allowed to make the medical decisions rather than insurance company bureaucrats. Provide the doctors, not the HMOs deciding the appropriate drugs for patients in their care. We must ensure that patients